BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Numb r

09843197

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER	THAN
			(Column 1)		(Column 2)			TYPE		OR	SMALL ENTITY	
TOTAL CLAIMS			20					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		Ī	BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			20 minus 20=		. 0			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			2 minus 3 =		0		Ī	X40=		OR	X80=	
MU	LTIPLE DEPEN	IDENT CLAIM P	RESENT					+135=		OR	+270=	
* If	the difference	in column 1 is	less than ze	ro, ente	r "0" in c	olumn 2	L	TOTAL		OR	TOTAL	710
CLAIMS AS AMENDED - PART II								'		•	OTHER	THAN
		(Column 1)	(Columi			(Column 3)		SMALL E	ENTITY	OR	SMALL	ENTITY
AMENDMENT A	٠.	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MI	Minus	***	F CL AIM	=		X40=		OR	X80=	
	THOTFHESE	INTATION OF IM	JETIFLE DEF	ENDEN	CLAIIVI			+135=		OR	+270=	
								TOTAL		OR	TOTAL	
		(Column 1)		(Colui	mn (1)	(Column 3)	A	DDIT. FEE		J • · · ·	ADDIT. FEE	
		CLAIMS		HIGH		(Column 3)	Г		ADDI	1 1		4001
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						 -			On		
								+135=		OR	+270=	
										OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)								DDIT. FEE		-		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X40=		00	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDENT	CLAIM		 -	7.10-		OR	7,002	
٠,	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+270=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The "Highest Nun	nber Previously Pa	id For" (Total o	Independ	ent) is the	highest number	r four	nd in the app	ropriate box	in col	umn 1.	